



**Testimony to the Human Services Committee**

**Presented by Mag Morelli, President, LeadingAge Connecticut**

**March 12, 2013**

**Regarding**

**Senate Bill 1084, An Act Concerning Delays in Medicaid Application Processing**

**Senate Bill 1086, An Act Concerning Long-term Care**

**House Bill 6607, An Act Concerning Nursing Homes**

**House Bill 6609, An Act Concerning Nursing Home Transparency**

**House Bill 6610, An Act Concerning Federal Medicaid Waivers**

LeadingAge Connecticut is a membership organization representing over one hundred and thirty mission-driven and not-for-profit provider organizations serving older adults throughout the continuum of long term care. Our members are sponsored by religious, fraternal, community, and municipal organizations that are committed to providing quality care and services to their residents and clients. Our member organizations, many of which have served their communities for generations, are dedicated to expanding the world of possibilities for aging.

On behalf of LeadingAge Connecticut, I would like to submit the following testimony on several of the bills before you today.

**Senate Bill 1084, An Act Concerning Delays in Medicaid Application Processing**

The state's current Medicaid eligibility system is not able to qualify long term care applications in a timely manner and as a consequence, consumers are unable to access services in the community and nursing home providers are incurring millions of dollars in bills owed by the state. DSS has instituted a modernization plan which we believe will help the situation, but the full implementation of modernization is at least a year away. This crisis simply cannot wait and requires immediate action.

The bill before you today would at the very least place some level of guarantee that the modernized eligibility system will be operational within a year and that long term care eligibility determinations, including presumptive eligibility for community based applicants, will be done in a timely manner. LeadingAge Connecticut is appreciative of this proposal, but encourages the Committee to consider also implementing the presumptive eligibility and nursing home advanced payment programs now so as to provide immediate relief to applicants and providers of Medicaid long term care services that are experiencing excessive delays in the Medicaid eligibility process.

### **Senate Bill 1086, An Act Concerning Long-term Care**

Connecticut has undertaken a dramatic systems change in long term care. This change is being implemented through several Medicaid initiatives, including a strategic rebalancing plan that will allow more people the opportunity to receive services and supports in community based settings.

Connecticut's *Strategic Rebalancing Plan* was released on January 29, 2013 and is the result of a multi-month process initiated by the Governor and the General Assembly. The process included a collaborative effort of many state departments, the federal government, long-term care providers, consumers and other stakeholders. The initial plan is for the years 2013-15 with an overall goal of addressing the demand for Medicaid-funded long term care through 2025. The state anticipates that the plan will be updated annually. **[Link to view the 2013-2015 Strategic Rebalancing Plan](#)**

In addition to the *Strategic Rebalancing Plan*, the state engaged a consultant to develop "supply and demand" projections of long term care needs on a town by town basis. This data was compiled and has been circulated to assist providers, towns, and others in their own strategic planning. **[Click here to view the Strategic Rebalancing Plan's projections](#)** of long-term services and supports needs for Connecticut, including specific data by municipality, statewide level, and labor market groupings. Please note that the document is over 700 pages and page 28 (appendix A) contains a state map. To facilitate easy navigation to a specific city/town, place your mouse over the town name on the map and click.

LeadingAge Connecticut is supportive of these planning initiatives and would encourage continuous updating of this data, information and planning document. The state has stated that they do plan to conduct continuous updates. Therefore we would encourage any additional efforts to study the state's long term care needs or to modify the planning process be done in a manner that is coordinated with the existing *Strategic Rebalancing Plan* initiative.

### **House Bill 6607, An Act Concerning Nursing Homes**

This proposed bill calls for a new study of nursing homes and again, but we would encourage the state to conduct this additional research as a coordinated effort within the existing rebalancing strategic planning process.

The *Strategic Rebalancing Plan* that was released on January 29, 2013 includes extensive data on the current and future demand for Medicaid funded long term care nursing home beds. We would encourage the further development of this data analysis, as is proposed in this bill, to enhance our understanding of the *type* of nursing home services that will be needed in the near future so that providers can actively plan and build a model and infrastructure of nursing home care that makes sense for the future needs and demands of our long term care system and our integrated health care systems moving forward.

In addition, the *Strategic Rebalancing Plan* calls for the use of resources and grants to assist nursing homes with repurposing and/or downsizing. We support expanding the use of these funds to allow for their use in *modernizing* needed nursing home infrastructure so that we can create a modern-day nursing home environment that will meet consumer demand and market need.

### **House Bill 6609, An Act Concerning Nursing Home Transparency**

The Department of Social Services currently reimburses nursing homes through the Medicaid system using cost-based per diem rates. These rates are facility specific and are calculated by the state based on the costs of caring for residents. These documented costs are submitted annually to the state by every nursing home in an extensive thirty-seven page cost report. This annual cost report includes information regarding payments made to related parties. The following is a link to information regarding the currently required cost reports: <http://cjl.com/cost-report-info/>. *It should be noted that the actual rates paid to nursing homes are significantly lower than the calculated rates.*

### **House Bill 6610, An Act Concerning Federal Medicaid Waivers**

LeadingAge Connecticut has long supported the idea of commencing a comprehensive review of our various Medicaid waiver pilot programs, such as the assisted living pilot program, to evaluate their success and determine whether they should become a permanent part of the state Medicaid plan. We would encourage this review be done in collaboration with the overall Medicaid systems change initiatives.

Thank you for this opportunity to submit this testimony.

**Mag Morelli, LeadingAge Connecticut, 1340 Worthington Ridge, Berlin, CT 06037  
(860)828-2903 [mmorelli@leadingagect.org](mailto:mmorelli@leadingagect.org)**